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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *CDT*  
 This appln claims benefit of 60/401,499 08/06/2002

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *CDT*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> met after Allowance <i>CDT</i> Examiner's Signature Initials	STATE OR COUNTRY CA	SHEETS DRAWING	TOTAL CLAIMS 33	INDEPENDENT CLAIMS 2
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TITLE  
 Decomposition of organic azides

FILING FEE RECEIVED 567	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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